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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/812,648	03/29/2004	Jose Ramirez II	1020P18387	3409
57035 7590 06/26/2008 KACVINSKY LLC C/O INTELLEVATE			EXAMINER	
			FOUD, HICHAM B	
P.O. BOX 52050 MINNEAPOLIS, MN 55402			ART UNIT	PAPER NUMBER
	,		2619	
			MAIL DATE	DELIVERY MODE
			06/26/2008	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

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If Yes, brief description: \_\_\_\_\_.

Claim(s) discussed: Independent claims.

Type: a) ☐ Telephonic b) ☐ Video Conference

Exhibit shown or demonstration conducted: d) Yes e) No.

Identification of prior art discussed: \_\_\_\_\_.

Agreement with respect to the claims f)  $\square$  was reached. g)  $\boxtimes$  was not reached. h)  $\square$  N/A.

c) Personal (copy given to: 1) applicant 2) applicant's representative

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: <u>The applicant to amend the independent claims to overcome the rejection</u>.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

/Hicham B Foud/ Examiner, Art Unit 2619

Examiner Note: You must sign this form unless it is an Examiner's signature, if required

Attachment to a signed Office action.